

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Kelly PAC

ADDRESS (number and street) ▼

901 N Washington Street

Suite 700

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314-1535

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00493411

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2014

through

M M M / D D D / Y Y Y Y Y Y
07 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Theodore V. Koch

Signature of Treasurer

Theodore V. Koch

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Kelly PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y Y 07 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		118411.3
(b) Cash on Hand at Beginning of Reporting Period.....	145937.08	
(c) Total Receipts (from Line 19)	5363.13	211416.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	151300.21	329828.09
7. Total Disbursements (from Line 31)	44815.19	223343.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	106485.02	106485.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Kelly PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

To:

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0

10500

(ii) Unitemized

7

12

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

7

10512

(b) Political Party Committees

1356.13

2404.79

(c) Other Political Committees

(such as PACs).....

4000

198500

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

5363.13

211416.79

12. Transfers From Affiliated/Other

Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0

0

(b) Levin Funds (from Schedule H5)

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

5363.13

211416.79

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

5363.13

211416.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	23215.19	94643.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23215.19	94643.07
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000	112500
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	1600	16200
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	44815.19	223343.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44815.19	223343.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5363.13	211416.79
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5363.13	211416.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	23215.19	94643.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	23215.19	94643.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 15

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. National Republican Senatorial Committee

Mailing Address 425 2nd Street NE

City

Washington

State

DC

Zip Code

20002-4914

FEC ID number of contributing
federal political committee.

C

C00027466

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2404.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : 286-1061-i

Amount of Each Receipt this Period

1356.13

In-Kind: Catering / Finance Consulting

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1356.13

1356.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Abbott Laboratories Employee PAC

Mailing Address 100 Abbott Park Road
D312 AP6D-2

City State Zip Code
Abbott Park IL 60064-3502

FEC ID number of contributing
federal political committee.

C C00040279

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2014

Transaction ID : 899-1056-c

Amount of Each Receipt this Period

1000

Contribution

Full Name (Last, First, Middle Initial)

B. Employees of Northrop Grumman Corp. PAC (ENGPAC)

Mailing Address 2980 Fairview Park Drive

City State Zip Code
Falls Church VA 22042-4511

FEC ID number of contributing
federal political committee.

C C00088591

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : 280-1062-c

Amount of Each Receipt this Period

1000

Contribution

Full Name (Last, First, Middle Initial)

C. Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500 W

City State Zip Code
Washington DC 20001-2133

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2014

Transaction ID : 318-1048-c

Amount of Each Receipt this Period

500

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Viacom International, Inc. PAC

Mailing Address 1501 M Street NW
Suite 1100

City Washington State DC Zip Code 20005-1729

FEC ID number of contributing
federal political committee.

C C00167759

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 25 / 2014

Transaction ID : 283-1057-c

Amount of Each Receipt this Period

1500

Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 15

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Koch & Hoos, LLCMailing Address 901 N Washington Street
Suite 700

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 02 2014**Transaction ID : SB21B-500-1032-e**

Amount of Each Disbursement this Period

2309.46

Full Name (Last, First, Middle Initial)

B. National Republican Senatorial Committee

Mailing Address 425 2nd Street NE

City Washington State DC Zip Code 20002-4914

Purpose of Disbursement
Inkind: Catering / Finance Consulting

Candidate Name

National Republican Senatorial CommitteeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 30 2014**Transaction ID : SB21B-286-1061-i**

Amount of Each Disbursement this Period

1356.13

Full Name (Last, First, Middle Initial)

C. Senate DiningMailing Address Capitol S
110

City Washington State DC Zip Code 20510-0001

Purpose of Disbursement
PAC Food & Beverage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 23 2014**Transaction ID : SB21B-333-1064-e**

Amount of Each Disbursement this Period

128.5

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3794.09

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. The Gula Graham Group

Mailing Address 499 S Capitol Street SW
Suite 420

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement
PAC Event/Food & Beverage/Fax/Email/Shipping

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : SB21B-271-1050-e

Amount of Each Disbursement this Period

7746.02

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7746.02

23214.84

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Families for James Lankford

Mailing Address PO Box 1639

City Bethany State OK Zip Code 73008-1639

Purpose of Disbursement
Contribution

Candidate Name

James Paul Lankford

Office Sought: ☐ House
☒ Senate
☐ President

State: OK District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 23 / 2014

Transaction ID : SB23-894-1051-e

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

B. Rounds For Senate

Mailing Address PO Box 250

City Pierre State SD Zip Code 57501-0250

Purpose of Disbursement
Contribution

Candidate Name

Governor Marion Michael Rounds

Office Sought: ☐ House
☒ Senate
☐ President

State: SD District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SB23-849-1059-e

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

C. Terri Lynn Land for Senate

Mailing Address PO Box 308

City Grandville State MI Zip Code 49468-0308

Purpose of Disbursement
Contribution

Candidate Name

Terri Lynn Land

Office Sought: ☐ House
☒ Senate
☐ President

State: MI District:

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
07 / 23 / 2014

Transaction ID : SB23-859-1053-e

Amount of Each Disbursement this Period

2500

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Tisei Congressional Committee

Mailing Address 26 Main Street

City Lynnfield	State MA	Zip Code 01940-2510
-------------------	-------------	------------------------

Purpose of Disbursement
Contribution

Candidate Name

Ricahrd R. TiseiOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2014

Transaction ID : SB23-896-1052-e

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

B. Young For Iowa, Inc.

Mailing Address PO Box 162

City Van Meter	State IA	Zip Code 50261-0162
-------------------	-------------	------------------------

Purpose of Disbursement
Contribution

Candidate Name

David YoungOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

Transaction ID : SB23-886-1058-e

Amount of Each Disbursement this Period

2500

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

20000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Grafton County Republican Committee

Mailing Address 855 Quincy Road

City Rumney	State NH	Zip Code 03266-3539
----------------	-------------	------------------------

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Transaction ID : SB29-428-1055-e

Amount of Each Disbursement this Period

250

Full Name (Last, First, Middle Initial)

B. Nashua Police Patrolmen's Association

Mailing Address PO Box 3783

City Nashua	State NH	Zip Code 03061-3783
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Purpose of Disbursement
Donation

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2014

Transaction ID : SB29-890-1042-e

Amount of Each Disbursement this Period

350

Full Name (Last, First, Middle Initial)

C. The Josiah Bartlett Center For Public Policy

Mailing Address 7 S State Street

City Concord	State NH	Zip Code 03301-3723
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Purpose of Disbursement
Donation

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Transaction ID : SB29-744-1054-e

Amount of Each Disbursement this Period

1000

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1600.00

1600.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 15

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Kelly PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Gula Graham Group

Nature of Debt (Purpose):

Administrative/Salary/Overhead: PAC
Event/Food & Beverage/Fax/Email/ShippingMailing Address 499 S Capitol Street SW
Suite 420City State Zip Code
Washington DC 20003-4027

Outstanding Balance Beginning This Period

3362.23

Transaction ID : SD10-DEBT1031

Amount Incurred This Period

0

Payment This Period

3362.23

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►